

# I'M/WE'RE IN!

## CINEMONDAYS SPONSOR FORM

To purchase an All-Access Pass or CineMondays Sponsorship, please fill out this form and send it (along with your payment if sending check) to **Gershman Philadelphia Jewish Film Festival, 101 S. Independence Mall East, Philadelphia, PA 19106.**

**I/we would like to purchase (please check):**

- ALL-ACCESS PASS | \_\_\_\_ # of passes
- CINEPHILE SPONSORSHIP
- HOSPITALITY SPONSORSHIP
- FILM SPONSORSHIP
- PREMIER SPONSORSHIP
- SEASON SPONSORSHIP
- PRESENTING SPONSORSHIP

**Total amount of payment:**

\$ \_\_\_\_\_

Payment type (please check):

- Check  Credit Card

Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, ZIP: \_\_\_\_\_

Home Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

**For credit cards only** (*please note that an additional 3% charge will be added to credit card payments to offset processing fee*):

Name on Card: \_\_\_\_\_

Type of Card (please check):

- Visa  MC  Amex  Discover

Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Security Code: \_\_\_\_\_

**How would you like to be acknowledged on GPJFF promotional materials:**

\_\_\_\_\_

\_\_\_\_\_

**Thank you for your support!**